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Brinks Hofer Gils P.O. Box 10395 /03/2005 1800 1162 610	son & Lione	AU6	0 2 2005	Car	rtificate of Mailing or Tran his Fee(s) Transmittal is beir with sufficient postage for fill I Stop ISSUE FEE address TO (703) 746-4000 on the	emission	
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APPLICATION NO.	FILING DATE	FIRST NAMED IN Mitsuru K		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/627,890	07/24/2003			u Kano	9281-4610	3821	
TITLE OF INVENTION: A	CTIVE MATRIX DISPLAY	/ DEVICE					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	09/15/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	]		
SCHECHTER, ANDREW M		2871		349-113000			
"Fee Address" indical PTO/SB/47; Rev 03-02 (Number is required.  3. ASSIGNEE NAME AND		ation form e of a Customer BE PRINTED ON 6 elow, no assignce of this form is NO	(2) the na registered 2 registered listed, no THE PATEN data will app T a substitute	OR, alternatively, me of a single firm (having as attorney or agent) and the named patent attorneys or agents. If name will be printed.  T (print or type)  Dear on the patent. If an assign for filing an assignment.  CE: (CITY and STATE OR CO	a member a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	& LIONE	
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